

**IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF WISCONSIN**

Gregory Boyer, as Administrator of the Estate  
of Christine Boyer, and on his own behalf,

Plaintiff,

v.

Advanced Correctional Healthcare, Inc., *et*  
*al.*,

Defendants.

Case No: 20-cv-1123

Judge James D. Peterson

Magistrate Judge Stephen L. Crocker

**ADVANCED CORRECTIONAL HEALTHCARE, INC.'S STATEMENT OF POSITION  
AS OF APRIL 18, 2024 IN REGARD TO APRIL 25, 2024 STATUS CONFERENCE**

Advanced Correctional Health advises the Court as follows:

1. The Court in its March 21, 2024 Order directed the parties to confer and submit a joint proposed discovery plan related to plaintiff's Document Production Request No. 27 and any remaining discovery that the parties may seek related to that request. *See* ECF 189 at 8. As discussed herein, the parties have been in active discussions attempting to reach an agreement as to how they should proceed but have not been able to do so at this time.

2. The parties communicated regarding the proposed joint submission on March 27 (email), April 1 (telephone), April 4 (telephone), April 5 (email), April 9 (email), April 10 (email), April 11 (telephone), April 15-17 (email) and April 18 (telephone and email).

3. The March 21 Order pertained to information from ACH's third-party claims administrator, Gallagher Bassett, regarding claims against ACH arising out of deaths in ACH-served facilities. The information was disclosed by ACH to compromise a pending motion.

4. Plaintiff claimed in its motion that it was hindered in its attempt to locate medical records related to deaths of inmates in ACH-served facilities. On April 4, 2024, ACH's counsel

proposed that it would request that Gallagher Bassett search its claims files for medical records potentially responsive to the request, provided plaintiff would compensate Gallagher Bassett or its agents for the time and expense necessary to gather and produce those records.

5. The parties have been actively engaged in the practical aspects of that process, including discussions about how to identify and select cases that are substantively similar to Ms. Boyer's case to narrow the search and minimize costs. On April 11, 2024, ACH provided to plaintiff's counsel the attached index of two (2) coding fields utilized by Gallagher Bassett and proposed that plaintiff select fields of substantively similar medical conditions that ACH's counsel would ask Gallagher Bassett to search. *See attached.*

6. On April 8, 2024, plaintiff served a subpoena on Gallagher Bassett seeking to compel claims information and a deposition of a Gallagher Bassett representative on April 12, 2024. Plaintiff agreed to withhold enforcement of the subpoena while the parties continued to discuss a resolution.

7. Despite the efforts set forth above, including multiple discussions and exchange of draft proposals for a joint submission on this date, the parties have not yet reached agreement regarding a proposed discovery plan arising out of the March 21 Order. The parties need to reach agreement on the process for searching for Gallagher Bassett-held medical records to propose a discovery plan.

8. Plaintiff's counsel on this date proposed to ACH counsel that the parties seek an extension of one week to submit a proposed discovery plan to the Court and request that the Court adjourn the April 25, 2024 scheduling conference. ACH requests that the conference proceed as scheduled on April 25, 2024 to resolve these issues with the magistrate's guidance.

9. The undersigned will be out of the country on a long-planned vacation from April 26, 2024 to May 9, 2024. He requests that, should the Court adopt plaintiff's request to adjourn the planned conference, that it not re-schedule a conference for that period. Counsel also requests that no depositions be noticed until the magistrate has had an opportunity to discuss the parties' positions.

10. All parties have continued to cooperate and negotiate in good faith toward resolution and will continue to do so. The parties will continue to work together to attempt to resolve the matter and to provide a summary of their expectations for remaining discovery. ACH will update the Court as to any progress before the April 25, 2024 planning conference.

11. Co-Defendants have been awaiting plaintiff's counsel's and ACH's counsel's resolutions of these issues and, for this reason, have not been in a position to propose deadlines as to remaining discovery at this time. I have conferred specifically with counsel for the Monroe County defendants, Attorney Andrew Jones, and am authorized to state the foregoing on behalf of his clients.

Dated this 18<sup>th</sup> day of April, 2024.

**LEIB KNOTT GAYNOR LLC**

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### Loss Cause Description

- |   |  |
|---|--|
| <input type="checkbox"/> Covid-19 Vaccine                               | <input type="checkbox"/> _ Related to Delay in Care or Treatment     |
| <input type="checkbox"/> CVA and Stroke                                 | <input type="checkbox"/> _ Related to Diagnosis                      |
| <input type="checkbox"/> Delay in diagnosis                             | <input type="checkbox"/> _ Related to Outcome                        |
| <input type="checkbox"/> Delay in evaluation/assessment                 | <input type="checkbox"/> _ Related to Pain                           |
| <input type="checkbox"/> Delay in Transport                             | <input type="checkbox"/> _ Related to Treatment                      |
| <input type="checkbox"/> Delay in treatment                             | <input type="checkbox"/> Accident In other than Emergency Department |
| <input type="checkbox"/> Deliberate Indifference to Medical Needs       | <input type="checkbox"/> Alcoholic Problem                           |
| <input type="checkbox"/> Denial of Medical Care                         | <input type="checkbox"/> Allergic Reaction - Other                   |
| <input type="checkbox"/> Denial of Medication                           | <input type="checkbox"/> Any other Abdominal Injury or Illness       |
| <input type="checkbox"/> Dental Claims                                  | <input type="checkbox"/> Any other Cardiovascular Conditions         |
| <input type="checkbox"/> Diabetes                                       | <input type="checkbox"/> Any other Chest Injury or Disease           |
| <input type="checkbox"/> Discrimination                                 | <input type="checkbox"/> Any other Medication Related Problem        |
| <input type="checkbox"/> Dissatisfaction of Care                        | <input type="checkbox"/> Any other Surgery Related Problem           |
| <input type="checkbox"/> Dissatisfaction with Care                      | <input type="checkbox"/> Appendicitis                                |
| <input type="checkbox"/> Drug Abuse Problem                             | <input type="checkbox"/> Assault                                     |
| <input type="checkbox"/> Drug Interaction                               | <input type="checkbox"/> Billing                                     |
| <input type="checkbox"/> Drug Overdose by Patient                       | <input type="checkbox"/> Bleeding Problem                            |
| <input type="checkbox"/> Drug Reaction - Allergy                        | <input type="checkbox"/> Cancer of the Lung(s)                       |
| <input type="checkbox"/> Emergency Declaration Pandemic                 | <input type="checkbox"/> Cardiac Arrest                              |
| <input type="checkbox"/> Emergency Medicine - Failure to Properly Treat | <input type="checkbox"/> Cardiac Contusion with or without Tamponade |
| <input type="checkbox"/> Environment Related                            | <input type="checkbox"/> Child Birth Related Problems                |
| <input type="checkbox"/> Exposure - Hepatitis                           | <input type="checkbox"/> Chronic Obstructive Pulmonary Disease       |
| <input type="checkbox"/> Exposure - Tuberculosis                        | <input type="checkbox"/> Civil Rights Matter                         |
| <input type="checkbox"/> Failure to Diagnose                            | <input type="checkbox"/> Coronary Artery Disease                     |
| <input type="checkbox"/> Failure to Properly Monitor                    | <input type="checkbox"/> Coroner's Case/Unexpected Death             |
| <input type="checkbox"/> Failure to Properly Supervise                  | <input type="checkbox"/> COVID-19                                    |
| <input type="checkbox"/> Failure to Properly Treat                      |  |

- ☐ Failure to Properly Treat
- ☐ Failure to Provide Medications
- ☐ Failure to Provide Pain Medication
- ☐ Fall from Bed
- ☐ Fall from Wheelchair/Stretcher
- ☐ Fall in Bathroom
- ☐ Fetal Demise
- ☐ Fracture - Other
- ☐ Fracture of Hip
- ☐ Fracture of Rib
- ☐ Gastrointestinal Bleeding
- ☐ HIPAA Violation
- ☐ Improper Diagnosis
- ☐ Improper Treatment
- ☐ Improperly Administered Medication
- ☐ Induced Abortion
- ☐ Infections
- ☐ Injured by Employee
- ☐ Injury Other
- ☐ Laceration or Puncture Causing Wound Infection
- ☐ Medical Records Request
- ☐ Medication - Incorrect Dosage Given
- ☐ Medication - Not Ordered
- ☐ Medication - Omission

- ☐ Medication Related
- ☐ Methicillin resistant staphylococcus aureus
- ☐ Negligence - Other
- ☐ Negligent Credentialing
- ☐ Negligent Dental Work
- ☐ Negligent Injection
- ☐ No Cause of Loss Code
- ☐ Non-Compliant Patient
- ☐ Obstetrical - Other Complication
- ☐ Other
- ☐ Other Cancer
- ☐ Pain Pump
- ☐ Patient Fall - Other
- ☐ Patient Violence
- ☐ Records Related
- ☐ Refused to Treat Patient
- ☐ Respiratory Problems
- ☐ Self Inflicted Injury
- ☐ Sepsis
- ☐ Sexual Misconduct
- ☐ Sexual Molestation or Harrassment
- ☐ Slip and Fall
- ☐ Staff Conduct Related
- ☐ Subpoena
- ☐ Suicide
- ☐ Suicide Attempt
- ☐ Surgery Related
- ☐ Surgical - Foreign Body Left in Patient
- ☐ Surgical - Postoperative Complication
- ☐ Unknown
- ☐ Unresponsive
- ☐ Wrong Medication

- ☐ Additional Hospitalization
- ☐ Additional Medical Care
- ☐ Additional Surgery
- ☐ Allergic Reaction
- ☐ Amputation of Finger - Full or Partial
- ☐ Amputation Other
- ☐ Appendicitis
- ☐ Arm Injury
- ☐ Attempted Suicide
- ☐ Back Injury
- ☐ Billing Dispute
- ☐ Blood or Bleeding Problem
- ☐ Bowel Injury
- ☐ Brain Damage
- ☐ Broken Tooth or Teeth
- ☐ Cardiac Arrest
- ☐ Civil Rights
- ☐ Comatose
- ☐ Dead On Arrival
- ☐ Death
- ☐ Delay in Treatment
- ☐ Dept. of Health Investigation
- ☐ Discrimination
- ☐ Dislocation
- ☐ Dissatisfaction of Care
- ☐ Dissatisfaction with Care

**Loss Result Description**

- ...☐ Additional Hospitalization
- ...☐ Additional Medical Care
- ...☐ Additional Surgery
- ...☐ Allergic Reaction
- ...☐ Amputation of Finger - Full or Partial
- ...☐ Amputation Other
- ...☐ Appendicitis
- ...☐ Arm Injury
- ...☐ Attempted Suicide
- ...☐ Back Injury
- ...☐ Billing Dispute
- ...☐ Blood or Bleeding Problem
- ...☐ Bowel Injury
- ...☐ Brain Damage
- ...☐ Broken Tooth or Teeth
- ...☐ Cardiac Arrest
- ...☐ Civil Rights
- ...☐ Comatose
- ...☐ Dead On Arrival
- ...☐ Death
- ...☐ Delay in Treatment
- ...☐ Dept. of Health Investigation
- ...☐ Discrimination
- ...☐ Dislocation
- ...☐ Dissatisfaction of Care
- ...☐ Dissatisfaction with Care



- ☐ Emergency Room Visit
- ☐ Emotional Distress
- ☐ Fetal Demise
- ☐ Fracture
- ☐ Head Injury
- ☐ Heart Attack
- ☐ Hepatitis
- ☐ Hepatitis C
- ☐ Hernia
- ☐ HIPAA violation
- ☐ Hospitalization
- ☐ Infection
- ☐ Injury to Shoulder
- ☐ Laceration - Other
- ☐ Leg Injury
- ☐ Lung Cancer
- ☐ Medical Records Request
- ☐ Mental Anguish
- ☐ Methicillin resistant staphylococcus aureus
- ☐ No Injury
- ☐ No Resultant Injury Code
- ☐ Obstetrical - Other Complications
- ☐ Other
- ☐ Other Cancer

- ☐ Other Injury
- ☐ Pain and Suffering
- ☐ Paralysis
- ☐ Permanent Injury
- ☐ Prostate Cancer
- ☐ Records Related
- ☐ Refused Treatment
- ☐ Related to autopsy
- ☐ Related to Bill
- ☐ Related to Dental
- ☐ Related to Diagnosis
- ☐ Related to Equipment
- ☐ Related to Fall
- ☐ Related to Medication
- ☐ Related to Negligence
- ☐ Related to Outcome
- ☐ Related to Pain
- ☐ Related to Treatment
- ☐ Respiration - Other
- ☐ Seizures
- ☐ Self Inflicted Injury
- ☐ Sepsis
- ☐ State Board Investigation
- ☐ Stroke
- ☐ SUBPOENA
- ☐ Suicide
- ☐ Surgery
  
- ☐ Surgery
- ☐ Surgery Related
- ☐ Thyroid Damage
- ☐ Unknown
- ☐ WOUND